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PTO/SB/50 (06-03)

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REISSUE PATENT APPLICATION TRANSMITTAL

| | | |
|----------------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------|
| Address to: Mail Stop Reissue Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 | Attorney Docket No. | 60018/101:1 |
| | First Named Inventor | Michael J. Masterson |
| | Original Patent Number | 6,370,811 |
| | Original Patent Issue Date (Month/Day/Year) | April 16, 2002 |
| | Express Mail Label No. | EV105700373US |

| | | | |
|-------------------------------------------------------|----------------------------------------------------|----------------------------------------|---------------------------------------|
| APPLICATION FOR REISSUE OF: (check applicable box) | <input checked="" type="checkbox"/> Utility Patent | <input type="checkbox"/> Design Patent | <input type="checkbox"/> Plant Patent |
|-------------------------------------------------------|----------------------------------------------------|----------------------------------------|---------------------------------------|

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| APPLICATION ELEMENTS (37 CFR 1.173) | | ACCOMPANYING APPLICATION PARTS | |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/SB/56) <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification and Claims in double column copy of patent format <i>(amended, if appropriate)</i> 4. <input checked="" type="checkbox"/> Drawing(s) <i>(proposed amendments, if appropriate)</i> 5. <input checked="" type="checkbox"/> Reissue Oath/Declaration (original or copy) <i>(37 CFR 1.175) (PTO/SB/51 or 52)</i> 6. <input checked="" type="checkbox"/> Power of Attorney 7. <input type="checkbox"/> Original U.S. Patent currently assigned? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If Yes, check applicable box(es))</i> <ul style="list-style-type: none"> <input type="checkbox"/> Written Consent of all Assignees (PTO/SB/53) <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(PTO/SB/96)</i> 8. <input type="checkbox"/> CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table 9. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all of the following are necessary)</i> <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> i <input type="checkbox"/> CD-ROM (2 copies) or CD-R (2 copies); or ii <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies | | 10. <input checked="" type="checkbox"/> Statement of status and support for all changes to the claims. See 37 CFR 1.173(c). 11. <input type="checkbox"/> Original Patent Grant <ul style="list-style-type: none"> <input type="checkbox"/> Ribboned Original Patent Grant <input type="checkbox"/> Statement of Loss (PTO/SB/55) 12. <input type="checkbox"/> Foreign Priority Claim (35 U.S.C. 119) <i>(if applicable)</i> 13. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 14. <input type="checkbox"/> English Translation of Reissue Oath/Declaration <i>(if applicable)</i> 15. <input type="checkbox"/> Preliminary Amendment 16. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 17. Other: _____ _____ _____ | |

18. CORRESPONDENCE ADDRESS

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| Name (Print/Type) | John A. Rafter, Jr. | Registration No. (Attorney/Agent) | 31,653 |
| Signature | | | |
| Date | April 15, 2004 | | |

This collection of information is required by 37 CFR 1.173. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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REISSUE APPLICATION FEE TRANSMITTAL FORMDocket Number (Optional)
60018/101:1**Claims as Filed – Part 1**

| | (1) Claims in Patent | (2) Number Filed in Reissue Application | (3) Number Extra | Small Entity | | Other than a Small Entity | |
|----------------------------------------|-------------------------------|--------------------------------------------------|----------------------------|--------------|-----------|---------------------------|--------------|
| | | | | Rate | Fee | Rate | Fee |
| Total Claims (37 CFR 1.16(j)) | (A) 22 | (B) 57 | **** 35 = | x \$ 9 = | 315 | or | x \$ _____ = |
| Independent claims (37 CFR 1.16(i)) | (C) 4 | (D) 10 | * 6 = | x \$ 43 = | 258 | | x \$ _____ = |
| | | | | | | | \$ _____ |
| | | | Basic Fee (37 CFR 1.16(h)) | | \$ 385 | | |
| | | | Total Filing Fee | | \$ 958.00 | OR | \$ _____ |

Claims as Amended – Part 2

| | (1) Claims Remaining After Amendment | | (2) Highest Number Previously Paid For | (3) Extra Claims Present | Small Entity | | Other than a Small Entity | |
|-------------------------------------------|--------------------------------------------|-------|-------------------------------------------------|-----------------------------------|--------------|-----|---------------------------|--------------|
| | | | | | Rate | Fee | Rate | Fee |
| Total Claims (37 CFR 1.16(j)) | *** | MINUS | ** | * = | X \$ _____ = | | or | x \$ _____ = |
| Independent Claims (37 CFR 1.16(i)) | *** | MINUS | ***** | = | x \$ _____ = | | | x \$ _____ = |
| | | | | Total Additional Fee | \$ | | | OR \$ |

* If the entry in (D) is less than the entry in (C), Write "0" in column 3.

** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

*** After any cancellation of claims.

**** If "A" is greater than 20, use (B – A); if "A" is 20 or less, use (B – 20).

***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

 Applicant claims small entity status. See 37 CFR 1.27. Please charge Deposit Account Number _____ in the amount of _____.
A duplicate copy of this sheet is enclosed. The Director is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account Number 19-4455.
A duplicate copy of this sheet is enclosed. A check in the amount of \$ 958.00 to cover the filing/additional fee is enclosed. Payment by credit card. Form PTO-2038 is attached.**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**April 15, 2004

Date

31,653

Registration Number, if applicable

John A. Rafter

Signature of Applicant, Attorney or Agent of Record

John A. Rafter, Jr.

Typed or printed name

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re reissue application of

Michael J. Masterson

Application No.: Not Yet Assigned.

Filed: Concurrently Herewith

Original Patent No. 6,370,811

Issued: April 16, 2002

For: **APPARATUS AND METHOD FOR
MONITORING TERMITE ACTIVITY**

Date: April 15, 2004

**STATEMENT OF STATUS AND SUPPORT FOR CLAIM CHANGES
UNDER 37 C.F.R. § 1.173(c)**

TO THE COMMISSIONER FOR PATENTS:

Claims 1-79 are pending, of which Claims 23-79 have been added by amendment as included in the specification. No claim has been canceled. Claims 1, 3, 17, 19, 23, 30, 38, 50, 62, and 70 are in independent form.

Support for Claims 23-79 can be found at various parts of original patent No. 6,370,811 and, in particular, at column 3, line 29 through column 4, line 65, describing the features shown in FIGS. 3 and 4. For example, entrance passage 18 shown and described therein provides support for the limitation of "the passageway being dimensioned to permit travel to the subterranean organisms from the soil toward the material and being tapered from a wide end proximate to the soil to a narrow end proximate to the material" in Claim 23.

Additional support for Claims 27, 37, 49, 61, 69, and 79 can be found in the original patent at column 4, line 66 to column 5, line 35, describing with reference to FIG. 3 with relation to skirt member 48.

Additional support for the barrier of Claims 32-35, 39-42, 53-57, and 65 -67, and 75-77, may be found at column 4, lines 15-42.

Additional support for the body core, separable from the body housing, limitations of Claims 38-49 may be found at column 5, lines 36-59.

Respectfully submitted,

April 15, 2004

By John A. Rafter,
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